

WERC-14
MIA
09/03

STATE OF WISCONSIN
WISCONSIN EMPLOYMENT RELATIONS COMMISSION
P.O. Box 7870, Madison, WI 53707-7870
(608) 266-1381

PETITION FOR FINAL AND BINDING ARBITRATION
PURSUANT TO SECTION 111.77, WIS. STATS.

In the Matter of the Petition of

To Initiate Arbitration Between
Said Petitioner and

**THE FILING FEE FOR INTEREST
ARBITRATION IS \$500 SPLIT
EQUALLY BETWEEN BOTH
PARTIES. PROCESSING BEGINS
WHEN A PETITION AND \$250 IS
RECEIVED AT WHICH TIME THE
OTHER PARTY IS BILLED BY THE
COMMISSION FOR THE
REMAINING \$250.**

Submit an original **and 5 copies** of this petition to the Commission. Attach additional sheets if necessary. A copy of this petition must be served by the Petitioner on the other party by registered or certified mail.

The Petitioner alleges that it and the other party have reached an impasse in their bargaining on wages, hours and conditions of employment to be incorporated in a collective bargaining agreement, and requests the Wisconsin Employment Relations Commission to conduct an investigation and determine whether final and binding arbitration should be initiated.

1. Name and address of Municipal Employer involved: _____

Principal representative: _____

Phone No. (_____)

2. Name and address of the Collective Bargaining Representative involved: _____

Principal representative: _____

Phone No. (_____)

3. Description of the collective bargaining unit involved with inclusions and exclusions: _____

Approximate number of employees in unit _____

4. List the issue or issues at impasse between the parties. _____

5. The parties participated in mediation conducted by:

-
6. (Check one): _____ 1) The Petitioner desires that the arbitration be limited to the selection of one party's final offer.
- _____ 2) The parties have agreed not to proceed under (1) above and agree to give the arbitrator authority to determine all issues in dispute.

7. Attach a statement hereto setting forth relevant facts pertaining to compliance, by the parties, with the provisions set forth in Sec. 111.77(1) and (2), Wis. Stats.

Dated at _____, Wisconsin, this _____ day of _____, 20____.

By _____
(Petitioner and affiliation, if any)

By _____ Title _____

Address _____

City, Zip Code _____ Phone No. _____